

1 _____ BILL NO. _____

2 INTRODUCED BY _____
3 (Primary Sponsor)

4 A BILL FOR AN ACT ENTITLED: "AN ACT EXEMPTING CERTAIN CRITICAL ACCESS HOSPITALS FROM
5 HOSPITAL UTILIZATION FEES; AMENDING SECTIONS 15-66-102 AND 15-66-201, MCA; AND PROVIDING
6 AN APPLICABILITY DATE."

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8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

9
10 **Section 1.** Section 15-66-102, MCA, is amended to read:

11 **"15-66-102. (Temporary) Utilization fees -- inpatient bed days -- hospital outpatient revenue --**

12 **exemption.** (1) ~~Each~~ Except as provided in subsection (4), each hospital in the state shall pay to the
13 department a utilization fee in the amount of \$70 for each inpatient bed day.

14 (2) ~~Each~~ Except as provided in subsection (4), each hospital shall pay to the department a utilization
15 fee in the amount of 0.90% of hospital outpatient revenue.

16 (3) (a) Except as provided in subsection (3)(b), all proceeds from the collection of utilization fees,
17 including penalties and interest, must, in accordance with the provisions of 17-2-124, be deposited to the credit
18 of the department of public health and human services in the state special revenue account provided for in 53-
19 6-149.

20 (b) The department shall deposit 54% of the amount paid in accordance with subsection (2) in the
21 Montana HELP Act special revenue account provided for in 53-6-1315.

22 (4) A critical access hospital, as defined in 50-5-101, is exempt from the utilization fees provided for in
23 subsections (1) and (2) if the critical access hospital has not entered into an affiliation agreement with another
24 hospital giving the other hospital final decisionmaking and governing authority. (Void on occurrence of
25 contingency--sec. 18, Ch. 390, L. 2003--see chapter compiler's comment; terminates June 30, 2025, on
26 occurrence of contingency--sec. 48, Ch. 415, L. 2019.)

27 **15-66-102. (Temporary -- effective on occurrence of contingency) Utilization fee for inpatient**

28 **bed days -- exemption.** (1) (a) ~~Each~~ Except as provided in subsection (1)(b), each hospital in the state shall

1 pay to the department a utilization fee in the amount of \$50 for each inpatient bed day.

2 (b) A critical access hospital, as defined in 50-5-101, is exempt from the utilization fee provided for in
3 subsection (1)(a) if the critical access hospital has not entered into an affiliation agreement with another
4 hospital giving the other hospital final decisionmaking and governing authority.

5 (2) All proceeds from the collection of utilization fees, including penalties and interest, must, in
6 accordance with the provisions of 17-2-124, be deposited to the credit of the department of public health and
7 human services in a state special revenue account as provided in 53-6-149. (Void on occurrence of
8 contingency--sec. 18, Ch. 390, L. 2003--see chapter compiler's comment.)"

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10 **Section 2.** Section 15-66-201, MCA, is amended to read:

11 **"15-66-201. (Temporary) Reporting and collection of fees.** (1) On or before March 31 of each year,
12 a hospital shall file with the department an annual report of the number of inpatient bed days and of hospital
13 outpatient revenue during the preceding year beginning January 1 and ending December 31. The report must
14 be in the form prescribed by the department. The report must be accompanied by a payment in an amount
15 equal to the fees required to be paid under 15-66-102.

16 (2) On or before January 31 of each year, the department of public health and human services shall
17 provide the department with a list of hospitals licensed and operating in the state and subject to the provisions
18 of 15-66-102 during the preceding year beginning January 1 and ending December 31. The list must identify
19 critical access hospitals exempt from the fees pursuant to 15-66-102(4). (Void on occurrence of contingency--
20 sec. 18, Ch. 390, L. 2003--see chapter compiler's comment; terminates June 30, 2025, on occurrence of
21 contingency--sec. 48, Ch. 415, L. 2019.)

22 **15-66-201. (Temporary -- effective on occurrence of contingency) Reporting and collection of**
23 **fee.** (1) On or before January 31 of each year, a hospital shall file with the department an annual report of the
24 number of inpatient bed days during the preceding year beginning January 1 and ending December 31. The
25 report must be in the form prescribed by the department. The report must be accompanied by a payment in an
26 amount equal to the fee required to be paid under 15-66-102.

27 (2) On or before January 31 of each year, the department of public health and human services shall
28 provide the department with a list of hospitals licensed and operating in the state during the preceding year

1 beginning January 1 and ending December 31. The list must identify critical access hospitals exempt from the
2 fee pursuant to 15-66-102(1)(b). (Void on occurrence of contingency--sec. 18, Ch. 390, L. 2003--see chapter
3 compiler's comment.)"

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5 NEW SECTION. **Section 3. Applicability.** [This act] applies to hospital utilization fees due on or after
6 January 31, 2022.

7 - END -